

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

LUNCH PAIL REPUBLICANS INDEPENDENT EXPENDITURE ONLY  
COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C C00515593

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

JV Murphy &amp; Associates

Date

MM / DD / YYYY

Mailing Address 1422 Tiger Lily Lane

Amount

6618.75

City State Zip Code  
Joliet IL 60435

Transaction ID : SE.4171

Purpose of Expenditure  
Billboard

Category/  
Type 004

Office Sought: ☒ House State: IL  
☐ Senate District: 08  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:  
JOE WALSH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election  
for Office Sought 6618.75

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

JV Murphy &amp; Associates

Date

MM / DD / YYYY

Mailing Address 1422 Tiger Lily Lane

Amount

2598.00

City State Zip Code  
Joliet IL 60435

Transaction ID : SE.4174

Purpose of Expenditure  
Billboard

Category/  
Type 004

Office Sought: ☒ House State: IL  
☐ Senate District: 16  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:  
ADAM KINZINGER

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election  
for Office Sought 2598.00

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

9216.75

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Stange

[Electronically Filed]

Date

MM / DD / YYYY

Signature